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ABSTRACT

This Region VIII Operation MEDIHC (Military Experience Directed into Health Careers) comprehensive report covers the program's efforts to provide a state focal point of advice and assistance to all health-trained veterans seeking entrance into the civilian health services field during the period of June 1, 1970, through December 31, 1978. The arrangement of the report is as follows. Chapter 1 is a summary of the program's operations and outcomes relating to the contract objectives. Chapters 2-4 present applicant flow through the counseling and placement programs and the results of these procedures as reported at twelve-month intervals. Restraints to placement are reported in chapter 5. Projects that contribute to the constant flow of veterans seeking assistance from MEDIHC are described in chapters 6 and 7. The final chapter covers administrative meetings attended by the Region VIII MEDIHC staff. The scope of work followed during the period of 1970-1978 is included in the appendices. (JH)

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FINAL REPORT

Contract No. HRA 232-78-0094

Operation MEDIHC
(Military Experience Directed Into Health Careers)

Submitted to the

U.S. Department of Health, Education, and Welfare,
Public Health Service, Bureau of Health Manpower,
Division of Associated Health Professionals

By the

Colorado Hospital Association
2140 South Holly Street
Denver, Colorado 80222

April 20, 1979

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This report is made pursuant to contract No. HRA 232-78-0094. The amount charged to the Department of Health, Education, and Welfare for the work resulting in this report (inclusive of the amounts so charged for any prior reports submitted under this contract) is $249,740.00. The names of the persons employed or retained by the contractor, with managerial or professional responsibility for such work, or for the content of the report, are as follows:

Tom R. Sangster, Program Director
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U.S. DEPARTMENT OF HEALTH, EDUCATION & WELFARE
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FORWARD

Since June 1, 1970, Region VIII Operation MEDIHC has provided counseling and job placement assistance to over 3,000 health trained, ex-military personnel interested in pursuing careers in the civilian health field.

The Region VIII MEDIHC Program was implemented by the Colorado Hospital Association, with funds provided by the Colorado Hospital Association over the period of June 1, 1970 to December 31, 1972. Subsequent funding for the period of January 1, 1973 through December 31, 1978 was provided by the Public Health Service of the United States Department of Health, Education and Welfare.

This Final Comprehensive Report presents an account of work performed from June 1, 1970 through December 31, 1978. The work on which this report is based was done under Contract Nos. NO1, AH-44035, HRA 232-78-0094 from the Division of Associated Health Professions, Bureau of Health Manpower, Public Health Service, U.S. Department of Health, Education and Welfare. The Program's activities and accomplishments are referenced to their respective Scope of Work item. See Appendix A.

The staff of Region VIII Operation MEDIHC gratefully acknowledges the cooperation and assistance extended us by

persons and organizations too numerous to cite individually. We appreciate the assistance of Dr. Joseph Kadish, Chief, Interdisciplinary Programs Branch, Division of Associated Health Professions, and Dr. J. Joseph Stevens, DHEW Region VIII MEDIHC Coordinator. We especially wish to express our esteem for the support and leadership of Ms. Alice Frazer, DHEW National MEDIHC Coordinator.

The continued support of the Colorado Hospital Association has always been appreciated. Of all the groups to whom we express acknowledgements, we place in the highest esteem the more than 3,000 returning service men and women who came to us seeking assistance and advice, and the employers and educators who provided them career opportunities.

Tom R. Sangster
Vice President (MEDIHC Program Director)
Colorado Hospital Association

INTRODUCTION

The Region VIII Operation MEDIHC Comprehensive Report covers the program's efforts to provide a state focal point of advice and assistance to all health trained veterans seeking entrance to the civilian health services field during the period of June 1, 1970 through December 31, 1978.

The arrangement of the Comprehensive Report follows. Chapter I is a summary of the program's operations and outcomes relating to the contract objectives. Chapters II - IV present applicant flow through the counseling and placement programs and the results of these processes as reported at twelve month intervals. Restraints experience in employment are reported in Chapter V. Projects that contribute to the constant flow of veterans seeking assistance from MEDIHC are described in Chapters VI and VII. The final chapter of the report covers administrative meetings attended by the Region VIII MEDIHC staff.

Activities undertaken to accomplish each task specified in the Scope of Work are referenced to the appropriate Scope of Work item. The Scope of Work followed during the period of 1970 - 1978 is in Appendix A. This report was produced under the U.S. Department of Health, Education and Welfare Contract No. HRA 232-78-0094.

CHAPTER I

Summary of the Program Operations & Outcomes

On December 31, 1978, the Region VIII Operation MEDIHC (Military Experience Directed Into Health Careers) completed eight years of continuous operation. The Colorado Hospital Association has administered the MEDIHC Program for the State of Colorado since June, 1970. The origin of the Region VIII multi-state program dates back to 1973, when the Montana Operation MEDIHC Program was combined with Colorado's program at the request of the sponsor. This combination proved successful, and, in January, 1974, North Dakota, South Dakota and Wyoming MEDIHC Programs merged with the Colorado/Montana Program, also at the request of the sponsor. Coverage of Utah began in January 1975 and the first regionalized MEDIHC program was then fully operational, with one centrally located office in Denver, Colorado.

This report deals with operations in Colorado since June, 1970, and the other five states from their inception to the program. No information is provided on the MEDIHC programs in Montana, North Dakota, South Dakota, Utah and Wyoming prior to their inception to the Colorado program. Activities and outcomes of projects undertaken to meet the Region VIII Operation MEDIHC contract objectives are summarized in this chapter.

Table 1

Annual Statistical Report: 1970 - 1978

Status of Caseload	1970 - 1978
TOTAL APPLICATIONS	3,270
STATED OBJECTIVES:	
Work Full Time	1,176
Work and School	1,546
School Full Time	170
Objective Not Determined	378
TOTAL CLOSED CASES	3,223
SUCCESSFUL HEALTH PLACEMENTS:	
Work Only	633
Work and School	77
School Only	216
Re-enlistment	63
TRANSFERS OUT OF STATE	552
UNSUCCESSFUL CLOSURES:	
Not Placed in Health Career	289
Closed for Other Reasons	1,393
TOTAL OPEN CASES	47
Not Separated From Service	2
Separated From Service	45

Applicant Caseload

Since the inception of the program, 3,270 requests for assistance were received by Region VIII Operation MEDIHC. Figure 1 shows a breakdown of applicants to the program by years.

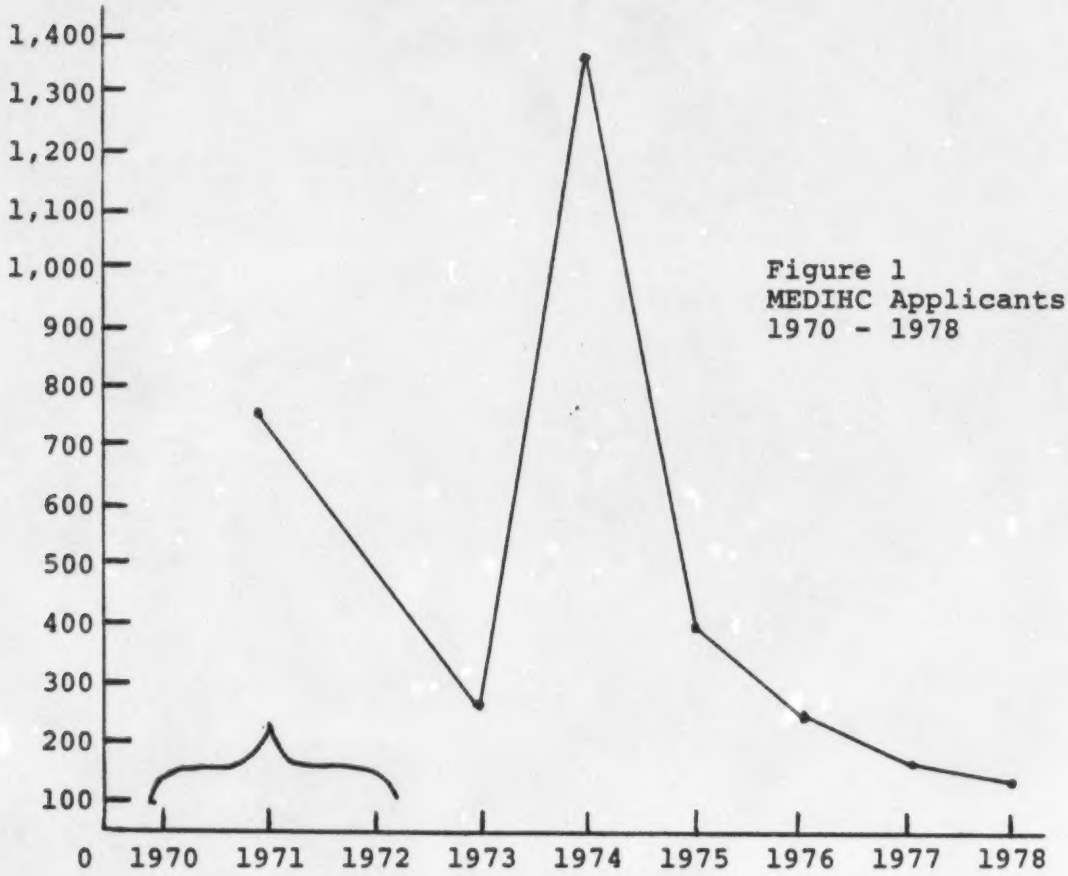


Figure 1
MEDIHC Applicants
1970 - 1978

Placement and Counseling Activities

Counseling and placement activities involved cooperative working arrangements with the applicant, employers and educators. Results of counseling activities from 1970 - 1978 show the two largest categories of "successful" placements were health job 68% and health school 23%. Two categories accounted for over 47% of the placements in health occupations, 17% were placed in nursing and related activities; 30% were placed in other professional and technical fields. Figure 2 shows applicant placements by year.

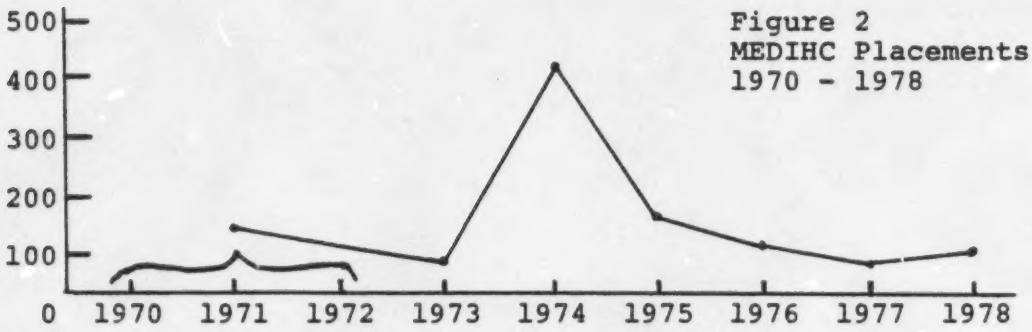


Figure 2
MEDIHC Placements
1970 - 1978

Resources for counseling material are categorized in two major sections: placement information and health career information. The section on job placement identifies activities initiated with employers of health care personnel. In the health career education material section, sources from

which MEDIHC received publications and catalogues on a routine basis are identified.

Applicant Follow-up Study

Applicants who participated in the MEDIHC program were sent a questionnaire twelve months from the date of their closure by the counselor. The purpose of the questionnaire was to learn whether applicants placed in health jobs and/or educational programs remained in the health field.

Restraints to Placement

One of the primary concerns expressed by the MEDIHC staff dealt with employment restraints veterans experienced upon entering civilian life. The MEDIHC staff worked for and against legislation of health care certification and licensure as it best benefited the veteran.

In promoting the acceptance of military training as the equivalent of civilian academic courses, MEDIHC counselors participated in programs in educational institutions, identified boards giving certification examinations and maintained current information on legislation affecting veterans.

Recruitment Efforts

Recruitment projects involved two major groups, potential applicants and employers of health care personnel. In reaching these groups, activities were initiated with educational institutions, government agencies, health care facilities and military bases. Hospitals accounted for over 50% of MEDIHC placements, followed by clinics at 10%.

Recruitment activities aimed at the general public involved the use of radio, television and newspapers. Also, MEDIHC material was distributed by staff members at conferences and meetings.

Administrative Meetings

MEDIHC staff members participated in Regional, Bi-Regional and National MEDIHC conferences as they were called from 1970 - 1978.

Details of the program administration, such as personnel and sources of funds are in Appendix B.

CHAPTER II

Applicant Caseload
Scope of Work Tase B2 in Appendix A

During the time period from June 1, 1970 through December 31, 1978, 3,270 applicants requested counseling and placement assistance in converting their health related training and experience to an appropriate civilian setting.

This chapter contains data on selected characteristics of applicants by year for 1970 - 1978, by health career objective stated on application forms and by geographical preference stated on application forms.

Table 2, "Applications and Stated Objectives", shows that 36% of the applicants were seeking immediate full-time employment upon separation from the military, while 48% of the applicants indicated they sought immediate employment along with additional education. Of the applicants, 5% expressed an objective of attending school on a full-time basis upon separation from the military, and 11% did not indicate an objective at the time they completed the application form.

Table 2
"Applications and Stated Objectives"
1970 - 1978

APPLICATIONS	1970-1972	1973	1974	1975	1976	1977	1978	TOTAL	%
Work Full Time	238	114	492	128	82	51	71	1,176	36.0
Work and School	407	131	634	173	99	64	38	1,546	47.2
School Full Time	39	5	87	18	9	7	5	170	5.2
Objective Not Determined	46	5	132	75	55	38	27	378	11.6
TOTAL	730	255	1,345	394	245	160	141	3,270	100.0

Table 3 shows the percentage of applicants indicating a multi-state geographical preference. These applicants indicated a preference in relocation to two or more of these states: Colorado, Montana, North Dakota, South Dakota, Utah, Wyoming. As the combined state effort (Region VIII) program began in 1973, figures are shown for the years 1973 - 1978.

Table 3
"Applicant Caseload Multi-State Preference"

APPLICANTS	1973	1974	1975	1976	1977	1978	AVERAGE
% INDICATING MULTI-STATE PREFERENCE	51.4	47.7	48.3	34.9	35.9	20.7	39.8

CHAPTER III

Counseling and Placement Activities

Scope of Work Tasks B1, B2, B3, B6, B7, B8 in Appendix A

The vocational and educational counseling program and the placement service of the Region VIII Operation MEDIHC Program involved cooperative working relationships with three major groups: applicants, educators and employers. Activities undertaken to counsel and place applicants in educational or employment settings are discussed in the following paragraphs.

APPLICANT COUNSELING ACTIVITIES

Applications were accepted from an individual either prior to, or after his or her separation from the military. In either case, the applicant was counseled on an individual basis as to his/her educational and career goals. Whenever possible, the veteran was interviewed in person, otherwise, information was relayed by mail or telephone. When the applicant was interested in furthering his/her education, materials were provided on schools and colleges throughout the region where the applicant indicated a desire to live. Educational counseling materials were filed by occupational category and detailed information was available on specific careers and training opportunities. For those applicants undetermined of the field they wanted training in, booklets and pamphlets were made available listing brief descriptions of a number of health careers in all fields.

MEDIHC remained in continual contact with many educational institutions and continually updated school catalogues, pamphlets and general information. A list of educational counseling materials is found in Appendix C on page 46. Information was also provided to those veterans interested in financial assistance for their education.

Employment counseling was provided on an individual basis. Each applicant was required to submit a resume to MEDIHC for their file and assistance in writing one was provided to those individuals not having a resume at the time they applied. Further employment counseling included reviewing employment interviewing techniques, discussing with the veteran the most advantageous ways of presenting their training and skills to a prospective employer. This area of counseling proved to be helpful to the veteran in many cases as most of them were approaching the civilian job market for the first time.

Information was collected by the MEDIHC staff on each applicant to complete their file. The applicant was asked to list specifically the areas within the six-state region that he or she would be willing to relocate to. The applicant was also asked to indicate their desired salary range. When the individual resided outside of the region at the time of application, he/she was asked to indicate whether they planned a visit to the area for employment

interviewing purposes. This information provided helpful guidelines when referring the applicant for employment.

Any applicant interested in an area outside of the Region VIII Operation MEDIHC area was referred to the appropriate State MEDIHC agency.

When the veteran was ready to go to work, employment referrals were made to openings in health care facilities in the geographical areas of the region which the veteran had listed as preferred. A copy of the veteran's resume was sent to the employer and the veteran was notified by mail or telephone of the position. From that point, the employer and the applicant discussed specifics of employment.

Follow up was made with each applicant after a referral had been made, and every applicant in the active section of the files was contacted on a quarterly basis to update their files regarding employment status. The applicant's file remained open until employment was found, or contact was lost.

Contact was kept constant with health care employers as to be sure to understand their needs, thereby referring qualified applicants to them. See Chapter VI, Recruitment Efforts, for information regarding contact with employers.

Of the 3,270 veterans applying with the program, 1,541 were placed successfully in health employment or education. Table 4 shows a complete breakdown of the closed applicant caseload.

Table 4

Applicant Case Disposition by Year
1970 - 1978

Applicant Status	1970-1972	1973	1974	1975	1976	1977	1978	TOTAL	%
CLOSED CASES	639	202	1,171	414	308	153	336	3,223	100
Successful:	142	63	622	289	208	89	128	1,541	48
Health Job	80	26	236	102	79	44	66	633	20
Health School	29	6	102	38	22	7	12	216	7
Job & School	16	3	43	13	1	0	1	77	2
Re-enlistment	5	2	24	13	12	3	4	63	2
Transfer	12	26	217	123	94	35	45	552	17
Unsuccessful:	497	139	549	125	100	64	208	1,682	52
Non-Health	31	6	155	40	41	17	7	297	9
Other Reasons	466	133	394	85	59	47	201	1,385	43
TOTAL	639	202	1,171	414	308	153	336	3,223	
Success Ratio	.22	.31	.53	.70	.68	.58	.38		

The success of MEDIHC's efforts to provide counseling and information on educational opportunities can be measured by noting that 170 applicants indicated a desire to go to school full-time when applying with the MEDIHC Program, and comparing that to the fact that 216 were successfully enrolled in school on a full-time basis at the close of the program.

Table 5 shows successful placements by occupational categories.

Table 6 shows MEDIHC placements by State.

Table 5

Region VIII, MEDIHC Placements by Occupational Field
1970 - 1978

OCCUPATION	NUMBER IN JOBS	NUMBER IN SCHOOL	TOTAL	PERCENT
Administration	116	27	143	15.4%
Biomedical Instrumentation	31	6	37	4.0%
Dental Services	26	10	36	3.8%
Environmental Health	10	4	14	1.5%
Laboratory Services	94	38	132	14.2%
Nursing Services	110	45	155	16.7%
Physicians Physician Support	75	26	101	10.9%
Radiological Services	26	6	32	3.5%
Other Health - Related Occupations	217	59	276	30.0%
TOTAL	705	221	926	100.0%

Table 6

MEDIHC Placements by State
1970 - 1978

STATE	TYPE OF PLACEMENT			
	Job	Work & School	School	TOTAL
Colorado	403	39	128	570
Montana	13	1	9	23
North Dakota	50	7	25	82
South Dakota	48	5	13	66
Utah	66	11	31	108
Wyoming	53	14	10	77
TOTAL	633	77	216	926

MEDIHC's success in placing applicants in employment was a result of many factors. Likewise, there were many factors affecting the inability to place applicants.

One main factor affecting the difficulty in placing applicants was that at any given time, approximately 40 - 50% of the applicants on file with the program resided outside of the immediate region. Employers were hesitant to consider, and normally would not hire an employee without first interviewing that individual in person. This information was given to any applicant living outside of the area, and he or she was urged by the MEDIHC staff to visit the area for the purpose of employment interviewing, if at all possible. Given the time and expense of traveling, this was not possible for most applicants, therefore, a high percentage of files of those individuals living outside of the Region VIII MEDIHC area were closed due to transfer to, or placement in another state, or lost contact.

COUNSELING MATERIAL

MEDIHC maintained current information on health related employment opportunities and educational programs and continued to expand their files. To provide effective counseling it was essential to continually update this information. Information sources are listed in the following discussion under the headings: Placement Information and Educational Information.

Placement Information

Information on jobs available in the health field was obtained from many sources:

MEDIHC received the extent of information regarding employment openings directly from the health care employers in the six-state region. Approximately 550 health care employers listed their job orders with the program. Visits were made to many of these employers, thereby allowing the MEDIHC staff to personally open communications between the applicant and employer. MEDIHC also learned of employment/ training programs within the institution. Recruitment visits to health care facilities are listed in Chapter VI.

In addition, once a MEDIHC applicant had been placed with a health care employer, the fact served as a constant

reminder to list any new vacancies with the program.

MEDIHC counselors reviewed medical classified sections in the newspapers, professional journals and health care publications, and posted the information for applicants.

On occasion, job orders were received from the National MEDIHC Office or other State MEDIHC offices.

Educational Information

Catalogues and brochures on health career programs from universities and schools were updated on a yearly basis.

In 1975, the MEDIHC staff worked with other agencies to produce the poster "Health Careers" and a booklet entitled, Health Careers for You, published by the Colorado Medical Society. Approximately 100 health careers were listed with brief descriptions and information regarding training opportunities. A yearly update of this information was received.

The pamphlet, 200 Ways to Put Your Talent to Work in the Health Field, published by the National Health Council was provided.

Allied Health Programs in Junior and Senior Colleges, published by the U.S. DHEW, PHS, HRA was used as counseling material.

Other counseling material provided to the veteran included:

Service Directory for Veterans in Colorado

From GI to Civilian, published by the Colorado Division of Employment and Training

CHAPTER IV

Applicant Follow-up Study
Scope of Work Task B10 in Appendix A

Applicants were mailed questionnaires twelve months from the date of their closure in the MEDIHC Program. The purpose of the questionnaire was to determine the length of time applicants placed in a health job and/or educational program remained in the health field.

Response to the questionnaire was poor, in that a small percentage of the questionnaires were returned completed to the MEDIHC office.

For the year 1977, of 153 questionnaires mailed, 27 were returned completed to MEDIHC. Of those 27, employment and/or educational status was indicated as follows:

Remaining in health career:	16
Remaining in health school:	3
Remaining in both health job and school:	3
No longer in the health field:	5
	27

Responses received from prior year's applicant follow-up were comparably as low, therefore making it difficult to report on and evaluate the information.

CHAPTER V

Restraints to Placement
Scope of Work Task B5, B12 in Appendix A

Throughout its operation, the Region VIII MEDIHC Program was aware of how certain civilian requirements for professional licensure or certification affected the veteran in regard to his/her employment in the health field. When the need arose, MEDIHC was active in either promoting or working against legislation regarding these licensure/certifications, as it best benefited the veteran.

In 1973, MEDIHC lobbied against legislation regarding the licensure of the Physician's Assistant. This licensure, were it a prerequisite for employment, would have been a barrier to the veteran. Many times the veteran had the necessary experience and training to expertly assist the physician in civilian employment, but would not have met the requirement for civilian licensure. As MEDIHC analyzed the situation, and when it was seen that this legislation was headed in the wrong direction, it was successfully stopped.

Realizing the remaining need for a positive effort in this matter, MEDIHC wrote the Guidelines for Utilization of Physician's Assistants.

MEDIHC also worked with legislature regarding the

Emergency Medical Technicians statutes and the waiver of tuition for the veteran in Colorado schools and universities. In 1975, MEDIHC was asked by the Colorado Department of Health to draft a challenge policy enabling certain corpsmen to challenge the State EMT-A exam. It was approved by the Training Committee.

MEDIHC realized that at times it was a detriment to the veteran to be locked into laws as established professions attempted to create barriers to the upward mobility of the returning veteran whose training and experience was service related. MEDIHC worked against statutes and other licensure requirements having an adverse effect on veterans.

CHAPTER VI

Recruitment Efforts

Scope of Work Task B8, B13 in Appendix A

Recruitment activities were focused on two major groups: potential applicants and employers of health care personnel. In reaching these groups, activities were directed to educational institutions, government agencies, health care facilities and military bases.

EDUCATIONAL INSTITUTIONS

MEDIHC remained in contact with educational facilities in the six-state region. Veterans Campus Representatives and Servicemens Occupational Counselors were kept informed of the programs activities and in turn, MEDIHC received current information on educational programs offered in health careers.

Information regarding the MEDIHC program was mailed the Veterans Representatives at area schools. A list follows of some of these educational facilities:

University of Colorado, Denver, CO
Community College, Denver, CO
Metropolitan State College, Denver, CO
Colorado State University, Fort Collins, CO
University of Northern Colorado, Greeley, CO
University of Southern Colorado, Pueblo, CO
El Paso Community College, Colorado Springs, CO

College of Great Falls, Great Falls, MT
Eastern Montana College, Billings, MT
Flathead Valley Community College, Kalispell, MT

Lake Regional Junior College, Devils Lake, ND
Minot State College, Minot, ND

South Dakota School of Mines and Technology, Rapid City, SD
South Dakota State University, Brookings, SD

University of Southern Utah, Logan, UT
Weber State College, Ogden, UT

By remaining in contact with educational facilities, veterans enrolled in health career educational programs could learn of employment opportunities prior to their graduation.

GOVERNMENT AGENCIES

Government agencies were contacted in the development of job opportunities listed with the MEDIHC program, as well as identifying potential applicants.

State Divisions of Employment

MEDIHC worked closely with the State Divisions of Employment. Job Service Centers referred qualified applicants to the program, resulting in approximately 5% of all MEDIHC applicants. Veterans Representatives were supplied with MEDIHC applications and brochures.

Health Systems Agencies

The Western Slope Health Systems Agency in Colorado was a source of employment for MEDIHC applicants.

HEALTH CARE FACILITIES

MEDIHC kept an updated listing of positions open at health care facilities in the six-state area. To do so required continuous contact with the health care employers. The following paragraphs describe the contacts made.

Approximately 550 health care employers were continually made aware of the Region VIII MEDIHC Program's placement service. Employers listed openings with MEDIHC as they occurred, by phoning them in or by mail on a "Job Order Form" provided by the MEDIHC office.

The MEDIHC Memo, a roster of available applicants, was sent monthly to 544 health care employers in the six states. This proved to be an excellent means of referral for the applicant. As well, it provided a reminder to the employer to list their job order with MEDIHC for referral of additional applicants.

Table 7 shows MEDIHC Memo recipients by type of employer. Table 8 shows MEDIHC Memo recipients by State.

Table 7

MEDIHC Memo Recipients
1970 - 1978

Recipients	Number	Percent of Total
Hospitals	357	65.6%
State Hospitals	10	1.9
Nursing Homes	22	4.0
Health Departments	6	1.1
Colleges	12	2.2
Government Agencies	35	6.4
Clinics and Solo Practitioners	39	7.3
Laboratories	15	2.7
Private Industry	16	2.9
Rx/Surg/Dental Suppliers	9	1.7
Emergency Medical Services	6	1.1
Organizations & Associations	6	1.1
Other	11	2.0
TOTAL	544	100.0%

Table 8

MEDIHC Memo Recipients by States
1970 - 1978

State	Number
Colorado	212
Montana	79
North Dakota	65
South Dakota	62
Utah	53
Wyoming	42
Other	31
Total	544

Personal visits were made to the health care facilities. Through 1976, numerous health care employers in Montana, North Dakota, South Dakota, Utah and Wyoming were visited personally by a member of the MEDIHC staff, on a yearly basis. In addition, the five above mentioned States' Annual Hospital Association Meetings were attended by one member of the MEDIHC staff annually. These meetings provided an opportunity to speak to and meet with a number of health care administrators, personnel directors and department heads at one time, thereby reducing the cost of traveling and increasing the exposure to the program.

In Colorado, the Denver metropolitan health care facilities were visited on a monthly basis and hospitals in the rural areas of the state were visited annually. The annual Colorado Hospital Association Meetings were attended by a MEDIHC staff member.

It should also be noted that members of the Colorado Hospital Association staff, when traveling on association business, always made an effort to mention the MEDIHC Program's serivces. This proved to be a signifigant cost-free benefit.

Some indication of the impact of the recruitment activities which have been described above is shown in Table 9, "MEDIHC Placements by Type of Employer".

Table 9

Region VIII, MEDIHC Employment Placements by Type of Employer
1970 - 1978

Type of Employer	Number	Percent
Hospitals	257	52.1%
Clinics	49	10.0%
Laboratories	26	5.3%
Nursing Homes	16	3.2%
Private Physician	20	4.0%
Local & State Government	24	4.9%
Federal Government	19	3.9%
Educational Institutions	10	2.0%
Pharmaceutical Industries	9	1.8%
Construction Industries	7	1.4%
Other Industries	38	7.7%
All Other	18	3.7%
TOTAL	493	100.0%

Over 50% of MEDIHC placements were in hospitals, followed by 10% in clinics.

MILITARY BASES

MEDIHC remained in routine contact with representatives on the bases in order to advise personnel separating from the service of the counseling assistance available through the program.

The bases in Montana, North Dakota, South Dakota, Utah and Wyoming were visited on an annual basis. In Colorado, most bases were visited quarterly.

Below is a list of the military bases visited by the MEDIHC staff.

Colorado

Lowry AFB
Fitzsimons AMC
Peterson Field
USAF Academy
Fort Carson Army Hospital

Montana

Malstrom AFB

North Dakota

Minot AFB
Grand Forks AFB

South Dakota

Ellsworth AFB

Utah

Hill AFB

Wyoming

Francis E. Warren AFB

Recruitment activities on the bases included attending and speaking to commander's calls, veterans employment seminars and separation briefings. Much of the success in reaching separatees prior to their return to civilian life can be attributed to the cooperation of the leaders and personnel at military bases in the states.

CHAPTER VII

Public Information Program
Scope of Work Task B4 in Appendix A

A public information program was set up to reach those health care employers and potential applicants not covered by previously mentioned recruitment efforts. In publicizing the services of MEDIHC, the following sources were utilized: television, radio, newspapers, conferences and meetings and promotional material.

A brief description of the activities undertaken is presented as referenced to the above paragraph.

MEDIA

Television

1974 KBTV, KMGH and KOA stations in Denver, Colorado presented public information service announcements on behalf of the MEDIHC program.

1974 - 75 The following radio spots were run on local stations:

30 seconds

Veterans! Here's a tip on a great career for you. If you've served in the medical corps of any of the armed forces you are overlooking a big

opportunity if you don't check out the Colorado MEDIHC program - that's short for Military Experience Directed Into Health Careers. Convert your experience into a career that offers a lot of job satisfaction, good pay, and prestige. Do it now. For further information, write Operation MEDIHC, 2140 South Holly, Denver, Colorado or phone 758-1630.

20 seconds

Here's a special message for veterans who served in the medical corps of any of the armed forces. There's a good career awaiting you in the health services. You have the experience MEDIHC is looking for - that's short for Military Experience Directed Into Health Careers. For further information write Operation MEDIHC, 2140 South Holly, Denver, Colorado or phone 758-1630.

Newspapers and Newsletters

1974 An article on the MEDIHC program was run in local papers in the states of Colorado, North Dakota, South Dakota and Wyoming. See Appendix D.

1977 An article entitled Putting the War Veteran to Work was published in the Empire Magazine section of the Denver Post. See Appendix D.

Conferences and Meetings

1974 MEDIHC participated in the Veteran's Assistance Day in Denver, Colorado sponsored by the United Veterans Council, the State of Colorado, and the City of Denver.

1975 - 76 MEDIHC participated in the Explo Career Fairs in Denver operating booths in the Health Career section.

1976 - 78 MEDIHC participated in the Career Days at the University of Colorado, Boulder, Colorado, operating booths in the Health Career section.

Public Information

Throughout the years MEDIHC pamphlets were distributed to potential applicants and employers. Examples of these pamphlets are included in Appendix D.

CHAPTER VIII

Administrative Meetings

Scope of Work Task B9 in Appendix A

Members of the Region VIII Operation MEDIHC staff attended all Regional, Bi-Regional and National MEDIHC conferences called from 1970 through 1978.

APPENDIX A

Scope of Work

Scope of Work

A. Objectives

The Contractor shall furnish the personnel, materials, equipment and facilities necessary to administer the MEDIHC program in the States of Colorado, Montana, North Dakota, South Dakota, Utah and Wyoming. The Contractor shall exert its best efforts to:

1. Provide Regional focal point of advice and assistance to returning health-trained veterans seeking to remain in the health professions after discharge.

2. Identify and seek to overcome obstacles to the entry of health-trained veterans into health professions in the States of Colorado, Montana, North Dakota, South Dakota, Utah and Wyoming.

3. Develop and implement improved methods for operating the Colorado, Montana, North Dakota, South Dakota, Utah and Wyoming MEDIHC agency.

4. Increase the overall number of health-trained veterans transferring into civilian health occupations employment and/or education.

B. Methodology

In pursuance of the above, the Contractor shall specifically:

1. Counsel and refer for placement all separatees who are interested in a career in health in the States of Colorado, Montana, North Dakota, South Dakota, Utah and Wyoming.

2. Counsel and refer to the appropriate State MEDIHC agency, all other potential separatees from the State's miliary bases who request such services.

3. Review Operation MEDIHC counseling and referral procedures; develop and implement improved methods of operation with special attention to referral, placement and follow-up activities.

4. Develop and implement a continuing public information program for Operation MEDIHC throughout the State in cooperation with public and private health-related organizations to increase participation in the program by separatees, health employers and health educators.

5. Promote the acceptance of military training as the equivalent of academic courses or programs for health occupations education.

6. Define and encourage the establishment of occupations or jobs in the fields of preventive health care and public health for which military training and experience are, in whole or part, suitable preparation.

7. Encourage and promote MEDIHC program arrangements with neighboring states in order to facilitate referral and placement of returning servicemen in the Region.

8. Develop comprehensive information on jobs, education and financial assistance opportunities for MEDIHC applicants.

9. Attend all Regional, Bi-Regional and National MEDIHC meetings.

10. Evaluate Operation MEDIHC counseling and referral procedures by following up on all health-related placements six months and one year after initial placement.

11. Document the extent to which licensure and certification restraints inhibit the transition from military to civilian health employment.

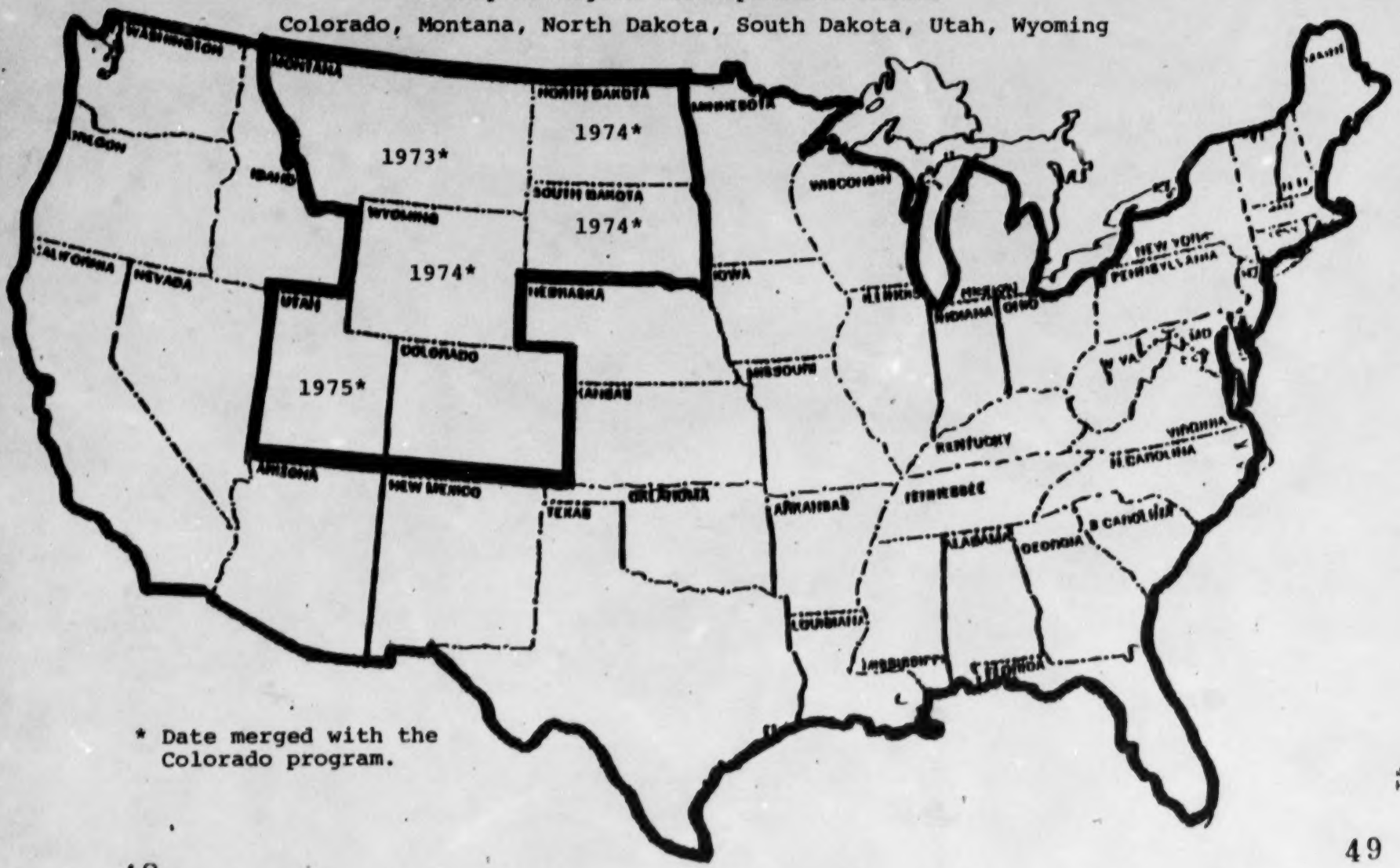
12. Document the extent to which failure to grant equivalency inhibits veterans from seeking additional education they need and/or want.

13. Personally visit each state in Region VIII at least once during each calendar year.

Appendix B

Map of Region VIII Operation MEDIHC

Colorado, Montana, North Dakota, South Dakota, Utah, Wyoming



* Date merged with the Colorado program.

PROGRAM OPERATIONS

List of Personnel Employed with the MEDIHC Program

Tom R. Sangster	Program Director
Lucinda A. Dummer	MEDIHC Coordinator
Regina Harnois	MEDIHC Counselor

List of Funding Sources

In addition to the direct funding support which the Region VIII Operation MEDIHC Program received from the DHEW during the period of 1970 - 1978, other institutions, organizations and persons made in-kind contributions to the Program. Listed below are the estimated program related expenditures:

DHEW, BHM, HRA	$249,740.00
Colorado Hospital Association	10,000.00
Newspaper Advertisement	1,000.00
Television and Radio Announcements	3,000.00
TOTAL	$263,740.00

Appendix C

MEDIHC MEMO

MEDIHC REFERRALS ARE FREE!

JUNE 1977

operation MEDIHC

Military Experience Directed Into Health Careers

Colorado Hospital Association • 2140 South Holly Street • Denver, Colorado 80222 • (303) 758-1630

June 1977

TO: ALL HEALTH CARE EMPLOYERS

FROM: THE MEDIHC STAFF

We would like to remind you that Operation MEDIHC may be able to save you time and money!!

The applicants we list in the MEDIHC Memo are but a sampling of the people available in the respective fields. There are many more on file who are qualified and seeking employment, so when you request information on a particular person, we will send you the resumes of other applicants with similar qualifications as well.

Remember, our service is provided at no cost to either you or the applicant!!!!

MEDICAL PHOTOGRAPHY

Taylor, Harlan H.

EDUCATION:	Bachelor of Arts in Biology and History.
EXPERIENCE:	Acting Director of Photography for a Research Institute for the last two years. Duties include Biological-medical photographer and administrator responsible for all patient photography and related surgical cases. Also does consulting on and developing photographic applications for research projects. Prepares graphic illustrations and slides for lectures.
SEEKING:	Medical Photographer
AREA PREFERENCE:	Denver, Colorado

NURSING

Hoehn, Anthony J.

EDUCATION:	Received Nursing Diploma, Registered Professional Nurse. 84 weeks Nurse Anethesia Course. CRNA by the American Association of Nurse Anesthetists.
EXPERIENCE:	Held position of Staff Nurse Anesthetist for various Army hospitals for a three year period. Performed all duties skillfully. During this period held positions of Head Nurse for Central Material Service for 1 year and Head Nurse of ward also for 1 year.
SEEKING:	Nurse Anesthetist - Charge of Staff or Nurse in Charge of Material Service.
AREA PREFERENCE:	Open

Lindecker, Howard J.

EDUCATION:	Bachelor of Science degree in Nursing; RN. Anesthesiology for ANC officers for 24 weeks. Regional Anesthesia for the Nurse Anesthetist - 5 months. Certified Registered Nurse Anesthetist by the American Association of Nurse Anesthetists.
EXPERIENCE:	Worked for two years while a student of anesthesiology administering general anesthesia and blocks to patients of all ages and states of health/illness. Supervised junior residents in the administering of anesthesia. Taught anesthesia basics to nurse graduates. Presently Staff Nurse Anesthetist for Army hospital: Administers general and regional anesthesia - scheduled and emergency. Teaches cardio-pulmonary resuscitation in civilian community, monitors infection control of anesthesia equipment.
SEEKING:	Nurse Anesthetist
AREA PREFERENCE:	Colorado, Montana, Utah and Wyoming

LIST OF EDUCATIONAL TRAINING INFORMATION

Revised 3/8/78

COLORADO HEALTH CAREERS COUNCIL - ROTATING CARD FILES

1. Animal Technologist
2. Asst. to Primary Care Physician
3. Audiologist
4. Blood Bank Technologist
5. Biomedical Technician
6. Certified Laboratory Assistant
7. Child Health Associate
8. Cytotechnologist
9. Dental Assistant
10. Dental Hygienist
11. Dental Technician
12. Dentist
13. Diagnostic Medical Sonographer
14. Dietitian
15. Dietetic Asst. & Dietetic Technician
16. Director of Physical Plant
17. Electrocardiography Technician (EKG)
18. Electroencephalograph Technician (EEG)
19. Emergency Medical Technician (EMT)
20. Enterostomal Therapy
21. Environmental Aide
22. Environmental Health
23. Environmental Technician
24. Executive Housekeeper
25. Food Service Supervisor
26. Food Technologist
27. Health Care Manager
28. Health Educator
29. Health Sciences Librarian
30. Histologic Technician
31. Health/Hospital Administrator
32. Hospital Admitting Officer
33. Hospital Central Service Technician
34. Hospital Director of Volunteer Services
35. Hospital Engineer
36. Hospital Personnel Director
37. Hospital Food Service Administrator
38. Hospital Public Relations Officer
39. Hospital Purchasing Agent
40. Industrial Hygienist (Environ. Health)
41. Materials Manager
42. Medical Assistant
43. Medical Illustrator
44. Medical Record Administrator
45. Medical Record Technician
46. Medical Secretary
47. Medical Laboratory Technician
48. Medical Technologist
49. Mental Health Technician
50. Mental Health Worker
51. Microbiologist
52. Music Therapy
53. Nuclear Medicine
54. Nutritionist
55. Nurses Aide or Orderly
56. Nurse, Licensed Practical (LPN)
57. Nurse, Professional (RN)
58. Nurse Practitioner
59. Occupational Therapist
60. Certified Occupational Therapy Asst. (COPA)
61. Ophthalmic Medical Assistant
62. Orthopaedic Physician's Assistant
63. Operation Room Technician
64. Osteopathic Physician (D.O.)
65. Pediatric Assistant
66. Pharmacist
67. Physical Therapy
68. Physical Therapy Assistant
69. Physician
70. Podiatrist
71. Psychiatric Aide
72. Psychologist
73. Public Health
74. Public Health Engineers
75. Public Health Engineering Technician
76. Public Health Entomology Aide
77. Public Health Noise Technician
78. Public Health Vector Control Specialist
79. Radiological Health Specialist (Environ.Hea
80. Radiation Therapy
81. Radiologic Technologist
82. Recreation Therapist
83. Rehabilitation Counselor
84. Respiratory Therapy
85. Safety Engineer (Environmental Health)
86. Sanitary Engineer (Environmental Health)
87. Sanitarian (Environmental Health)
88. School Health Educator
89. Social Worker - Medical
90. Social Worker - Psychiatric
91. Speech Pathology
92. Surgeon's Assistant
93. Urologic Physician's Assistant
94. Veterinarian
95. Ward Clerk

Appendix D

Putting the war veteran to work

By BILL HEMINGWAY
Empire Magazine

Reprinted with permission from *Empire* Magazine,
The Denver Post, November 13, 1977,

by Division of Associated Health Professions,
Bureau of Health Manpower,
Health Resources Administration,
U.S. Department of Health, Education, and Welfare.

Putting the war veteran to work

By BILL HEMINGWAY
Empire Magazine

TAXES GO higher and higher and there is less and less return to the taxpayer.

Vietnam and other recent service veterans are highly unemployable because combat skills can't be converted into civilian jobs.

Health care is not being provided adequately to rural areas.

These cliches are being challenged with federal programs such as Operation MEDIHC (Military Experience Directed Into Health Careers). MEDIHC was established in 1970 by the Department of Health, Education and Welfare and the Defense Department to help veterans with medical-technician skills find health-care jobs on the home front. The benefit of this job-placement service is to match the medical specialists — from hospital administrators to laboratory technicians to orderlies — with vacancies in hospitals, clinics and other health-care facilities, many in rural areas.

MEDIHC is administered by the Colorado Hospital Association (CHA) in Denver for a six-state region — Colorado, Utah, Wyoming, Montana and North and South Dakota. Its funding is from HEW's Public Health Service. The local agency helped establish the standards and procedures for the nation. Tom R. Sangster, MEDIHC project director and CHA vice president for industrial relations, says, "We were the first in the country to try this program. It was a pilot program when we began in 1970. The hospital association (with 104 member-hospitals of the 105 in Colorado and contacts with hospital groups in other states) is a natural link for job vacancies and job applicants."

The local agency also has pioneered many innovations such as bringing civilians into the medical-job program when the number of discharged veterans dwindled.

The MEDIHC agency in Colorado is one of 15 in the nation. Other federal agencies provide the job-placement service in 29 states. Alice Frazer, national MEDIHC coordinator in Washington, D. C., who began her long public health career in Colorado, says, "All of the programs are basi-

cally the same, but Colorado, with six states, is larger than most."

Dr. Joe Stevens, regional medical coordinator in Denver for the Public Health Service, says, "Alice and I are the grandparents. We started MEDIHIC in 1970. It was voluntary the first year. When it proved its value, we got funding for it."

One of the early problems was qualifying veterans to meet state standards to work at their medical specialties. Dr. Stevens says service training was not accepted by some state regulatory agencies and, in some cases, veterans could not even take a state exam without training in an accredited school.

He says, "We went to the schools and said, 'Don't lower your standards, but let the veteran take your tests for the record.' We live in a credential society. We use it as a filtering system. But experience should also be a factor. The system shouldn't hold back a veteran from a job."

MEDIHC workers also counsel veterans on education requirements and how to get them to qualify for jobs.

Mrs. Frazer says, "Veterans are now trained for civilian accreditation. They are qualified."

Nationwide, MEDIHC had placed nearly 31,000 veterans in civilian jobs through June 1977. Colorado had placed more than 800, according to Cindi Dummer, Colorado MEDIHC coordinator.

Lou Foubare, administrator at Mt. San Rafael Hospital in Trinidad, Colo., a 29-year Army veteran, was placed in his job through the MEDIHC program. He says, "I was referred to the Colorado Hospital Association by the Army staff."

He retired as a colonel in 1970 after his long duty with the Army Medical Service as an administrator. He worked as a personnel consultant for hospitals in Colorado and Louisiana before MEDIHC referred him to the Trinidad position.

He has used the MEDIHC program to hire other personnel for his hospital. He says, "They have a good recruitment program. Getting medical people is tough. They can draw from 50 states."

Sangster says, "Jobs in rural areas are hard to fill. The blue-eyed nurse won't take a job in Ash Can, Colo. We can find people who will take the jobs."

Civilians became eligible for the job-placement service in 1977 on a trial basis in three MEDIHC agencies — Colorado, Arizona and Massachusetts. Two more will be added in 1978.

But Colorado in 1974 began working civilians into the job vacancies when veterans were not available. Sangster says, "It was another service under the CHA. It was good management to fill the job vacancies.

"If an employer needed a medical technologist, the veteran got the preference under our commitment to HEW."

Ms. Frazer says, "When Colorado started placing civilians, the Public Health Service saw the possibilities. Tom and a few others started exploiting the situation. The Colorado people were pioneers as Westerners usually are.

"Let me make it clear. We're not neglecting veterans. They have the preference for our jobs under MEDIHC."

Ms. Dummer says that in the first six months of 1977 about a third of the job vacancies in the region were filled by non-veterans.

The Colorado region is continuing pioneer efforts in the MEDIHC program. The local agency took part in a pilot program in late 1976 to determine for HEW what medical specialties were short of manpower.

Ms. Dummer says, "We surveyed hospitals for maldistributed occupations. We found they have the most openings for physical therapists, radiological technicians and medical technologists.

"Now we are working to recruit workers for the positions that are the most difficult to fill. I go to the schools where they are trained. We hope to make job placements in these specialties. It will be a continuing study, annually at least."

Ms. Frazer says, "The three in Colorado are on everybody's list. In other areas there are shortages of medical records clerks, dieticians, food-service employees and respiratory therapists."

Sangster voices MEDIHC's contradictions of the three cliches:

- "If we pay tax money to train individuals in the service, we can recapture the taxpayers' money by transferring the skills to civilian jobs. And the working veteran is a taxpayer, too."
- "I don't believe the veteran is unemployable. At worst he could get a job as a hit man—but that's unacceptable. There are other fields, like health care, in which he can be employed. That's what MEDIHC is doing.

"Originally the ex-serviceman became at best a physician's aide. In the service and on the battlefield, there was no qualifying exam. Outside, they became orderlies. Now MEDIHC is qualifying them for and finding them skilled medical jobs."

- "MEDIHC clients are getting into rural Colorado to assist the doctor. They have extended his practice. They are not nurses. They can't analyze the medical history or give physicals or prescribe treatments. They can do followup on a patient. They do the legwork for the doctor.

"We see quite a bit more health-care services in rural areas. It has really blossomed, but we have a long way to go."

Arvid B. Brekke, CHS president, says, "The feedback on MEDIHC is very positive. It has a very useful purpose to assist hospitals in solving their health-manpower needs. That's its greatest impact.

"MEDIHC helps assure the public that institutions are staffed and that they can find staffing in critical areas. It is something that is assisting our communities. Health manpower is critical."

Sangster says, "MEDIHC is a vehicle for the communities to contact when they are short of health-care personnel.

"The health-care delivery system belongs to the public. It is a servant to the community." ■

Gidlund - 837-4706 (HEW)
July 12, 1973

Steve Smith says that he first started thinking seriously about a medical career while he was on patrol with the 101st Airborne in Viet Nam.

"Before I was drafted I was an engineering student at Modesto Junior College in California. Then the Army got me. After basic, I had 10 weeks' medical training at Fort Sam Houston. It still was just my Army job but, when I was patching up some guys after a fire fight, it occurred to me that this was pretty rewarding. I wanted to stay in the field, but I didn't know exactly what I wanted to do."

He made up his mind on his next assignment. He was transferred from the 101st to the 67th Evacuation Hospital at Qui Nhon on South Viet Nam's central coast. There he changed dressings, took care of amputees and worked in the emergency room. There also he met Katherine Zemyan, a pretty Second Lieutenant nurse. Steve worked with her and others, then decided to become a nurse also.

Following their return to the States in 1971, Steve and Kathy were married. Steve went to work as an orderly in Marin General Hospital in the San Francisco area while she finished her tour of duty at the Army's Letterman General Hospital. While they were working they began looking around for a nursing school that they could afford for Steve near a hospital where Kathy could work. They found heavy enrollments in the San Francisco area, and living expenses high. Besides, they wanted a change of scene. San Francisco was

too big a town for a Modesto, California fellow and a girl from Fort Defiance, Virginia.

There are a lot of nursing schools in the country, many in small towns, some that they could afford, and a few near hospitals where Kathy could work. But it would be a monumental search by mail. The Smiths needed help and, based on a tip from an ex-GI friend, they found it.

The friend told them about MEDIHC, a cumbersome federal acronym for Military Experience Directed Into Health Careers. Its a cooperative program by the Department of Health, Education and Welfare and the Department of Defense to help men and women who have been trained in health skills while in military service to capitalize on those skills when they return to civilian life. There are 53 MEDIHC agencies in the U.S., and the Smiths decided to write to the one in Colorado, a state in which they had not lived but which sounded good to them.

The Colorado State MEDIHC coordinator did their legwork for them, putting Steve into contact with El Paso Community College in Pueblo and telling Kathy about an opening in Canon City's St. Thomas More Hospital. Steve now is in school studying toward his Associate degree and an R.N. and, as part of his schooling, he is working eight hours a week in the Fort Carson Hospital. And Kathy is staff nurse at St. Thomas More, supplementing Steve's GI Bill schooling allowance.

3

Suzi Coleman is the MEDIHC Counselor for Colorado. She is an employee of the Colorado Hospital Association which receives a $19,542 yearly grant from HEW to help meet the growing shortage of qualified personnel in over 200 health fields.

Suzi explains that job openings are available for health workers in hospitals, public health, research, voluntary agencies, schools and industry. Her job is to help qualified ex-military personnel get started in a civilian health occupation that offers immediate income, or to get additional training if needed.

HEW estimates that by 1975, the health field will be the nation's largest employer; it now is the third largest. By 1980, the Department expects that more than 5 million workers will be engaged in health occupations. representing an increase of over 1.5 million health workers than there were in 1967.

MEDIHC is an effort to utilize the skills of military trained men and women to help alleviate the immediate need for additional health manpower.

Suzi says that the Smiths' case is not typical, but then, she admits, there are few "typical" placements. Some are sent to her by State employment agencies, and many are referred by the military's Project Transition. Armed Forces installations obtain rosters of health-trained personnel from three to six months before their separation from active duty. Those who are interested fill out application forms outlining training, experience, job interest and educational ambitions. The forms are sent to the MEDIHC counselor in the State designated by the service man or woman.

4

Suzi and her counterparts assume responsibility for proper placement by putting individuals in contact with the institutions or facilities that have openings for which the applicant qualifies. At that point, the applicant negotiates directly with the institution on specific terms of placement—salary, advancement opportunities, tuition, cost of training, or whatever other details are involved.

Eleven thousand veterans have located jobs and training opportunities in the field since the national program began in 1970. Since its inception in Colorado in January 1972, Suzi and her predecessor have placed nearly 200 ex-servicemen and women in schools, hospitals, nursing homes and clinics.

Her success, she says, is due principally to personal contact with the health professionals who do the hiring plus an active word-of-mouth network among the administrators regarding job openings. She also sends to administrators a free monthly bulletin that describes the qualifications of the people available.

OPERATION MEDIHC

Colorado Hospital Association 2140 South Holly Street Denver Colorado 80222 (303) 758-1630

VETERANS

WHAT IS MEDIHC?

Operation MEDIHC is a placement/referral service funded by the Department of Health, Education and Welfare, Public Health Service, to help you, the medically trained veteran, utilize your experience and skills in a civilian health career. MEDIHC also assists those who served in military fields unrelated to health but who are interested in pursuing health care careers. This service is provided free of charge to both the applicant and the employer.

HOW DOES MEDIHC WORK?

Interested individuals should fill out an application form available from Military Education Service Centers, local employment service offices, VA Assistance Centers and hospitals, and state MEDIHC agencies, and send it to:

MEDIHC Coordinator
Operation MEDIHC
2140 South Holly Street
Denver, Colorado 80222

The MEDIHC staff will appraise your qualifications and interests and refer you to institutions and facilities that have openings for someone with your qualifications. You negotiate directly with the institution on specific terms of placement, salary, advancement opportunities, or whatever details are involved.

The MEDIHC staff of the Colorado Regional MEDIHC Program is here to assist you. Please feel free to contact us at any time by calling: (303) 758-1630.

Administered by the Colorado MEDIHC Program in cooperation with the Public Health Service

COLORADO • MONTANA • NORTH DAKOTA • SOUTH DAKOTA • UTAH • WYOMING

OPERATION MEDIHC

Colorado Hospital Association 2140 South Holly Street Denver Colorado 80222 (303) 758-1630

WHAT IS OPERATION MEDIHC?

OPERATION MEDIHC IS A PLACEMENT PROGRAM AND WE'RE HERE TO HELP YOU!

MEDIHC was developed to assist men and women trained in health skills while in the military service, to capitalize on those skills when they returned to civilian life.

WHAT DOES MEDIHC DO?

MEDIHC assists both HEALTH CARE EMPLOYERS and APPLICANTS by providing a job placement service, FREE, with no charge to either the applicant or the employer.

HOW DO I CONTACT OPERATION MEDIHC?

The MEDIHC staff of the Colorado Regional MEDIHC Program is here to assist you. Please feel free to contact Cindi Dummer, MEDIHC Coordinator, or any other member of the MEDIHC or C.H.A. staff, at any time by calling collect at (303) 758-1630.

WHAT INFORMATION IS NEEDED BY OPERATION MEDIHC?

MEDIHC would like to know what positions you have available. The more information you can give us regarding background skills needed, salary and hours, the better we will be able to assist you.

HOW DOES MEDIHC WORK?

When there is an opening, we refer qualified individuals to your institution by sending their resume to you. (MEDIHC appraises each applicant's qualifications, aptitudes and interests.) At this point, you will determine which applicants you will contact directly, explaining to them specific terms of placement, salary, advancement opportunities and other details that would be involved in their possible employment. At MEDIHC we try to send you applicants whose qualifications fall within the perimeters of your openings, thus saving you time and money.

MEDIHC works with other agencies and assists in up-grading health care quality within our six-state region.

Administered by the Colorado MEDIHC Program in cooperation with the Public Health Service

COLORADO • MONTANA • NORTH DAKOTA • SOUTH DAKOTA • UTAH • WYOMING